	Docket No. 2002US303		
In Re Application Of: Ta	akanori Kudo et al		
Serial No. 10/042,531	Filing Date January 9, 2002	Examiner NOT ASSIGNED	Group Art Unit
Title: NEGATIVE DEE	P ULTRAVIOLET PHOTORESIS	Т	
	TO THE ASSISTANT COMM	IISSIONER FOR PATENTS:	
Transmitted herewith is:			
1) Correspondence Adda 2) Postcard	ress Indication Form		
in the above identified ap			
☐ No additional fee is		ned.	

The Assistant Commissioner is hereby authorized to charge and credit Deposit Account No.

Charge the amount ofCredit any overpayment.

Charge any additional fee required.

as described below. A duplicate copy of this sheet is enclosed.

Signature

Dated: March 20, 2002

Sangya Jain, Reg. No. 38,504 Clariant Corporation 70 Meister Avenue Somerville, NJ 08876 telephone (908) 429-3563

I certify that this document and fee is being deposited on Naur 20 2.002 with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231.

Signature of Person Mailing Correspondence

Vivian Austin

Typed or Printed Name of Person Mailing Correspondence

CC:

GAU 1752 RECEIVED APR 0 2 2002 TC 1700

PTO INSTRUCTIONS: PLEASE TAKE THE FOLLOWING ACTION WHEN THE CORRESPONDENCE ADDRESS HAS BEEN CHANGED TO CUSTOMER NUMBER: RECORD, ON THE NEXT AVAILABLE CONTENTS LINE OF THE FILE JACKET, ADDRESS CHANGE TO CUSTOMER NUMBER'. LINE THROUGH THE OLD ADDRESS ON THE FILE JACKET LABEL AND ENTER ONLY THE 'CUSTOMER NUMBER' AS THE NEW ADDRESS. FILE THIS LETTER IN THE FILE JACKET. WHEN ABOVE CHANGES ARE ONLY TO FEE ADDRESS AND/OR PRACTITIONERS WHEN ABOVE CHANGES ARE ONLY TO FEE JACKET. OF RECORD, FILE LETTER IN THE FILE JACKET.

PTO-FMD TALBOT-1/97

## RECEIVED EBC CSC

Please type a plus sign (+) inside this box	<b></b>	+
---	---------	---

PTO/SB/121 (10-00)

PTO/SB/121 (10-00)

Anri Approved for use through 10/31/2002. OMB 0651-0035

U.S. Patent addit rademark Office; U-S' DEFART MENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## **USPTO**

## **CORRESPONDENCE ADDRESS INDICATION FORM**

## Address to:

**Assistant Commissioner for Patents** Box CN Washington, DC 20231

Please recognize the following address as the correspondence address:								
☐ Cus	stomer Nu	umber			lace i a street varaber ar Code Label here			
OR		Type Customer Number	er here		26289			
Request for Customer Number (PTO/SB/125) submitted herewith.								
in the following listed application(s) or patent(s) :								
Patent Nu (if appropr		Application Number	Patent Da		U.S. Filing Date			
		10/042,531			01/09/02			
		·						
•								
Typed or				(check one)				
Typed or Printed Name Sangva Jain			Applica	ent or Patentee				
Signature	S. S			Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed.				
Date	March 20, 2002			(Form F	PTO/SB/96) ey or Agent of record			
Address of signer								
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more that one signature is required, see below *.								
Total of 2 farms are submitted								

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box CN, Washington, DC 20231.